

<b>ORDER FOR SUPPLIES OR SERVICES</b>										Page 1 Of 4							
<b>1. Contract/Purch Order/Agreement No.</b>  DAAE20-98-D-0003			<b>2. Delivery Order/Call No.</b>  0019		<b>3. Date Of Order/Call (YYYYMMDD)</b>  2002SEP04		<b>4. Requisition/Purch Request No.</b>  SEE SCHEDULE			<b>5. Priority</b>  DOA5							
<b>6. Issued By</b> TACOM-ROCK ISLAND AMSTA-LC-CFA-B DEE ANN DEWINTER (309)782-3801 ROCK ISLAND IL 61299-7630  EMAIL: DEWINTERD@RIA.ARMY.MIL				<b>Code</b> W52H09		<b>7. Administered By (If other than 6)</b> DCMA MANASSAS 10500 BATTLEVIEW PKWY SUITE 200 MANASSAS VA 20109-2342				<b>Code</b> S2404A							
<b>8. Delivery FOB</b>  <input type="checkbox"/> Destination <input checked="" type="checkbox"/> Other										<b>(See Schedule if other)</b>							
<b>9. Contractor</b>  LEICA TECHNOLOGIES INC 107 N KING ST LEESBURG VA 20176-2820  TYPE BUSINESS: Large Business Performing in U.S.			<b>Code</b> 7Z946		<b>Facility</b>		<b>10. Deliver To FOB Point By (Date) (YYYYMMDD)</b>  SEE SCHEDULE			<b>11. X If Business Is</b>  <input type="checkbox"/> Small <input type="checkbox"/> Small Disadvantaged <input type="checkbox"/> Woman-Owned							
<b>Name and Address</b>			<b>12. Discount Terms</b>  Net 30 Days		<b>13. Mail Invoices To the Address in Block</b> See Block 15												
<b>14. Ship To</b> SEE SCHEDULE			<b>Code</b>		<b>15. Payment Will Be Made By</b> DFAS COLUMBUS CENTER DFAS-CO/MINUTEMAN DIVISION PO BOX 182266 COLUMBUS OH 43218-2266				<b>Code</b> SC1032		<b>Mark all Packages and Papers with Identification Numbers in Blocks 1 and 2</b>						
<b>16. Type of Order</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; padding: 5px;"><b>Delivery/Call</b></td> <td style="width: 10%; text-align: center; padding: 5px;">X</td> <td style="padding: 5px;">This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.</td> </tr> <tr> <td style="padding: 5px;"><b>Purchase</b></td> <td></td> <td style="padding: 5px;">           Reference your <input type="checkbox"/> Oral; <input type="checkbox"/> Written Quotation, Dated _____, furnish the following on terms specified herein.            Acceptance. The Contractor Hereby Accepts The Offer Represented By The Numbered Purchase Order As It May Previously Have Been Or Is Now Modified, Subject To All Of The Terms And Conditions Set Forth, And Agrees To Perform The Same.         </td> </tr> </table>												<b>Delivery/Call</b>	X	This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.	<b>Purchase</b>		Reference your <input type="checkbox"/> Oral; <input type="checkbox"/> Written Quotation, Dated _____, furnish the following on terms specified herein. Acceptance. The Contractor Hereby Accepts The Offer Represented By The Numbered Purchase Order As It May Previously Have Been Or Is Now Modified, Subject To All Of The Terms And Conditions Set Forth, And Agrees To Perform The Same.
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Name Of Contractor				Signature				Typed Name And Title				Date Signed (YYYYMMDD)					
<input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:																	
<b>17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE</b> SEE SCHEDULE																	
<b>18. Item No.</b>		<b>19. Schedule Of Supplies/Service</b> SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price			<b>20. Quantity Ordered/ Accepted*</b>		<b>21. Unit</b>		<b>22. Unit Price</b>		<b>23. Amount</b>						
		KIND OF CONTRACT: Supply Contracts and Priced Orders Service Contracts															
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.					<b>24. United States Of America</b>					<b>25. Total</b> \$276,451.38							
					By: MARY DONOVAN /SIGNED/ DONOVANM@RIA.ARMY.MIL (309)782-4895					<b>29. Differences</b>							
<b>26. Quantity In Column 20 Has Been</b>							<b>27. Ship. No.</b>		<b>28. D.O. Voucher No.</b>		<b>30. Initials</b>						
<input type="checkbox"/> Inspected <input type="checkbox"/> Received <input type="checkbox"/> Accepted And Conforms To Contract Except As Noted  Date _____ Signature Of Authorized Govt Representative _____							<input type="checkbox"/> Partial <input type="checkbox"/> Final		<b>32. Paid By</b>		<b>33. Amount Verified Correct For</b>						
<b>36. I certify this account is correct and proper for payment</b>							<b>31. Payment</b>				<b>34. Check Number</b>						
Date _____ Signature And Title Of Certifying Officer _____							<input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final				<b>35. Bill Of Lading No.</b>						
<b>37. Received At</b>		<b>38. Received By</b>		<b>39. Date Received</b>		<b>40. Total Containers</b>		<b>41. S/R Account Number</b>		<b>42. S/R Voucher No.</b>							

<b>CONTINUATION SHEET</b>	<b>Reference No. of Document Being Continued</b> <b>PIIN/SIIN</b> DAAE20-98-D-0003/0019 <b>MOD/AMD</b>	<b>Page</b> 2 <b>of</b> 4
<b>Name of Offeror or Contractor:</b> LEICA TECHNOLOGIES INC		

SUPPLEMENTAL INFORMATION

- 1. This delivery order will obligate Contractor's Logistic Support (CLS) with 30 day Contractor Repair Time (CRT).
- 2. The price is established at a total of \$276,451.38, as offered by the contractor on the pricing spreadsheet in the basic contract.
- 3. The GLPS may be returned to the contractor for repair through 30 Sep 2003.

\*\*\* END OF NARRATIVE A 001 \*\*\*



Name of Offeror or Contractor: LEICA TECHNOLOGIES INC

CONTRACT ADMINISTRATION DATA

LINE	PRON/	OBLG	JOB	ACCOUNTING	OBLIGATED
<u>ITEM</u>	<u>AMS CD</u>	<u>ACRN</u> <u>STAT</u>	<u>ORDER</u>	<u>STATION</u>	<u>AMOUNT</u>
0001AA	M12CL302M1	AA 2	21	22035000026D6D02P52899526FB	S11116
	52899572101				
				TOTAL	\$ 276,451.38

SERVICE	ACCOUNTING	OBLIGATED
<u>NAME</u>	<u>STATION</u>	<u>AMOUNT</u>
Army	W52H09	\$ 276,451.38
	TOTAL	\$ 276,451.38